ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		6	4-4-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim	Date		Claim	Date		Claim	Date
Final / Original			Final / Original			Final / Original	
1			51			101	
2			52			102	
3			53			103	
4			54			104	
5			55			105	
6			56			106	
7			57			107	
8			58			108	
9			59			109	
10			60			110	
11			61			111	
12			62			112	
13			63			113	
14			64			114	
15			65			115	
16			66			116	
17			67			117	
18			68			118	
19			69			119	
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23			73			123	
24			74			124	
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26			76			126	
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35			85			135	
36			86			136	
37			87			137	
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41			91			141	
42			92			142	
43			93			143	
44			94			144	
45			95			145	
46			96			146	
47			97			147	
48			98			148	
49			99			149	
50			100			150	

If more than 150 claims or 10 actions staple additional sheet here

BEST AVAILABLE COPY

(LEFT INSIDE)